

Entity Client Account Form

This form **MUST** be completed in its entirety and **MUST** be submitted with every Entity (Business Entity, Trust, or any Non-Individual Organization) application for VFA and VALIC; VALIC Transfer/Rollover/Exchange, except VALIC Group Enrollments

VALIC Financial Advisors, Inc. (VFA)

New Account Update for All Accounts or for Existing Account # _____

The information in this application will be used to establish your account. Please notify us if corrections are needed or if this information changes in the future.

1. ENTITY ACCOUNT PROFILE

Type of Entity Account:

- | | |
|---|---|
| <input type="checkbox"/> Corporation | <input type="checkbox"/> Trust - Under Will |
| <input type="checkbox"/> Partnership | <input type="checkbox"/> Trust - Other _____ |
| <input type="checkbox"/> Unincorporated Association | <input type="checkbox"/> Non-Prototype - IRA* |
| <input type="checkbox"/> Limited Liability Company - Partnership | <input type="checkbox"/> Non-Prototype - Plan* |
| <input type="checkbox"/> Limited Liability Company - Corporation | <input type="checkbox"/> Non-Prototype - Trust* |
| <input type="checkbox"/> Limited Liability Company - Disregard Entity | |
| <input type="checkbox"/> Trust - Under Agreement | |

(*Note: NFS does not provide the tax reporting for Non-Prototype accounts.)

Number of Owners, Trustees, Custodians or Authorized Individuals: _____

Entity or Trust Legal Name: _____

Entity or Trust DBA: _____

Country of Tax Residence: _____ State of Organization: _____

Country of Organization: _____ Trust Date (required for Trusts): _____

Tax ID Number: _____

Legal Address (no P.O. Boxes): _____

City: _____ State: _____ ZIP: _____ Phone: (_____) _____

Mailing Address (if different than Legal, P.O. Box acceptable): _____

City: _____ State: _____ ZIP: _____ Fax: (_____) _____

2. DISCLOSURES

1. Are any account holders, authorized individuals, trust donors, trustees, or beneficiaries affiliated with or employed by a stock exchange or member firm of an exchange or FINRA, or a municipal securities broker-dealer? Yes No

If yes, name of company: _____

2. Are any account holders, authorized individuals, trust donors, trustees, or beneficiaries a director, 10% shareholder, or policy-making officer of a publically held company? Yes No

If yes, name of company: _____ Trading symbol: _____

3. Are any account holders, authorized individuals, trust donors, trustees, or beneficiaries a senior foreign political figure, or a family member or close relative of a senior foreign political figure? Yes No

4. If yes, please list the name of those individuals: _____

5. Have you enclosed documentation supporting (i) the existence of the legal entity (e.g., articles of incorporation or organization, government-issued business license, certificate of existence or formation, member operating agreement, or partnership agreement) and (ii) the authority of each individual to transact business for this account (e.g., corporate resolution, certificate of authority, or partnership certificate)? Yes No

6. If the entity is a Limited Liability Company, have you enclosed documentation that most closely reflects the U.S. federal income tax classification of the company? Yes No N/A

7. Have you enclosed copies of the pages from the operating agreement that include the official name of the entity and the signatures of all persons listed below that are authorized on this account? Yes No

8. If the entity is a trust, have you enclosed a full copy of the legal trust document? Yes No

3. TRUSTS (Complete Only for Trust Accounts.)

Also complete Section 1 for the Trust. Use this section to record the donor/contributor and all trustees. For additional trust donors or trustees, use additional forms.

Trust Donor/Contributor's Name: _____

SSN or Tax ID: _____ Date of Birth: _____

Legal Address (no P.O. Boxes) Same as Entity's Legal Address: _____

City: _____ State: _____ ZIP: _____

Home Phone: (____) _____ Work Phone: (____) _____ Country Citizenship: _____

Trust Donor/Contributor's Identity Verification: (Required for all VFA Accounts and all VALIC IRA and NQDA accounts)

Driver's License Passport Alien Registration Other Government Issued I.D. _____

Document Number (Required): _____

Issued By (Required): _____ Issue Date (If Available): _____ Expiration Date (Required): _____

Trustee's Name: _____

SSN or Tax ID: _____ Date of Birth: _____

Legal Address (no P.O. Boxes) Same as Entity's Legal Address: _____

City: _____ State: _____ ZIP: _____

Home Phone: (____) _____ Work Phone: (____) _____ Country Citizenship: _____

Trustee's Identity Verification: (Required for all VFA Accounts and all VALIC IRA and NQDA accounts)

Driver's License Passport Alien Registration Other Government Issued I.D. _____

Document Number (Required): _____

Issued By (Required): _____ Issue Date (If Available): _____ Expiration Date (Required): _____

4. ENTITIES (Complete Only for Business/Corporate Accounts.)

Also complete Section 1 for the Entity. Use this section to verify the identity of persons authorized to transact business for the entity. A Corporate Resolution, and/or documentation showing the authorized people must be attached. For additional Entities, use the Supplemental Client Account Form.

Primary authorized person's name: _____

SSN or Tax ID: _____ Date of Birth: _____

Legal Address (no P.O. Boxes) Same as Entity's Legal Address: _____

City: _____ State: _____ ZIP: _____

Home Phone: (____) _____ Work Phone: (____) _____ Country Citizenship: _____

Authorized Primary Person's Identity Verification: (Required for all VFA Accounts and all VALIC IRA and NQDA accounts)

Driver's License Passport Alien Registration Other Government Issued I.D. _____

Document Number (Required): _____

Issued By (Required): _____ Issue Date (If Available): _____ Expiration Date (Required): _____

Additional authorized person's name: _____

SSN or Tax ID: _____ Date of Birth: _____

Legal Address (no P.O. Boxes) Same as Entity's Legal Address: _____

City: _____ State: _____ ZIP: _____

Home Phone: (____) _____ Work Phone: (____) _____ Country Citizenship: _____

Authorized Person's Identity Verification: (Required for all VFA Accounts and all VALIC IRA and NQDA accounts)

Driver's License Passport Alien Registration Other Government Issued I.D. _____

Document Number (Required): _____

Issued By (Required): _____ Issue Date (If Available): _____ Expiration Date (Required): _____

Additional authorized person's name: _____

SSN or Tax ID: _____ Date of Birth: _____

Legal Address (no P.O. Boxes) Same as Entity's Legal Address: _____

City: _____ State: _____ ZIP: _____

Home Phone: (____) _____ Work Phone: (____) _____ Country Citizenship: _____

Authorized Person's Identity Verification: (Required for all VFA Accounts and all VALIC IRA and NQDA accounts)

Driver's License Passport Alien Registration Other Government Issued I.D. _____

Document Number (Required): _____

Issued By (Required): _____ Issue Date (If Available): _____ Expiration Date (Required): _____

5. MANAGERS AND BENEFICIAL OWNERS

The following portion of this section must be completed for corporations, limited liability companies, statutory trusts, business trusts, or other entity that is created by a filing of a public document with a Secretary of State or similar office, a general partnership, any similar business entity formed in the United States or a foreign country. Entity does NOT include sole proprietorships, unincorporated associations, or natural persons opening accounts on their own behalf.

Name and Title of Natural Person opening account: _____

Managing Person*: _____

SSN or Tax ID: _____ Date of Birth: _____

Legal Address (no P.O. Boxes) Same as Entity's Legal Address: _____

City: _____ State: _____ ZIP: _____

Home Phone: (_____) _____ Work Phone: (_____) _____ Country Citizenship: _____

Managing Person's Identity Verification: (Required for all VFA Accounts and all VALIC IRA and NQDA accounts)

Driver's License Passport Alien Registration Other Government Issued I.D. _____

Document Number (Required): _____

Issued By (Required): _____ Issue Date (If Available): _____ Expiration Date (Required): _____

*Includes an executive officer or senior manager (e.g. Chief Executive Officer, Chief Financial Officer, Chief Operating Officer, managing members, general partner, president, vice president, treasurer): or any other person who regularly performs similar functions. If appropriate, a managing person may also qualify as a beneficiary owner as described below.

Additional managers are listed on the Supplemental Entity Client Account Form (VL 23547-1).

Beneficial Owner**: _____

SSN or Tax ID: _____ Date of Birth: _____

Legal Address (no P.O. Boxes) Same as Entity's Legal Address: _____

City: _____ State: _____ ZIP: _____

Home Phone: (_____) _____ Work Phone: (_____) _____ Country Citizenship: _____

Beneficial Owner's Identity Verification: (Required for all VFA Accounts and all VALIC IRA and NQDA accounts)

Driver's License Passport Alien Registration Other Government Issued I.D. _____

Document Number (Required): _____

Issued By (Required): _____ Issue Date (If Available): _____ Expiration Date (Required): _____

Beneficial Owner**: _____

SSN or Tax ID: _____ Date of Birth: _____

Legal Address (no P.O. Boxes) Same as Entity's Legal Address: _____

City: _____ State: _____ ZIP: _____

Home Phone: (_____) _____ Work Phone: (_____) _____ Country Citizenship: _____

Beneficial Owner's Identity Verification: (Required for all VFA Accounts and all VALIC IRA and NQDA accounts)

Driver's License Passport Alien Registration Other Government Issued I.D. _____

Document Number (Required): _____

Issued By (Required): _____ Issue Date (If Available): _____ Expiration Date (Required): _____

**Includes any individual, if any, who directly or indirectly, through any contracts, arrangement, understanding, relationship or otherwise, owns 25% or more of the equity interests of the entity. If no individual meets the definition, please write "not applicable".

Additional owners are listed on the Supplemental Entity Client Account Form (VL 23547-1).

6. INVESTMENT PROFILE (Check all that apply.)

Initial Transaction Amount (If unknown, use approximate dollar value.): \$ _____ Product Sponsor: _____

Entity Investment Objective (See investment objectives on back of form.): <input type="checkbox"/> Long-Term Growth <input type="checkbox"/> Income <input type="checkbox"/> Safety of Principal	Entity Risk Profile: <input type="checkbox"/> High Risk <input type="checkbox"/> Moderately Conservative <input type="checkbox"/> Aggressive <input type="checkbox"/> Conservative <input type="checkbox"/> Moderately Aggressive <input type="checkbox"/> Cautious <input type="checkbox"/> Moderate	Entity will need these funds (Principal Amount): <input type="checkbox"/> Within 1 year <input type="checkbox"/> 5-10 years <input type="checkbox"/> 1-5 years <input type="checkbox"/> 10+ years
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RETAIN THIS CUSTOMER AGREEMENT PAGE FOR YOUR RECORDS

To: VALIC Financial Advisors, Inc.

In consideration of your opening one or more brokerage accounts on my behalf I represent and agree as follows:

- 1. Applicable Rules and Regulations.** All transactions through myself and VALIC Financial Advisors, Inc. are subject to the constitution, rules, regulations, customs and usage of the exchange or market (and its clearing house, if any) where executed as well as to any applicable federal or state laws, rules and regulations.
- 2. Payment Upon Demand.** I shall at all times be liable for the payment upon demand of any debit balance or other obligations owing in any of my accounts and I shall be liable to you for any deficiency remaining in any such accounts in the event of the liquidation thereof, in whole or in part, by you or by me and I shall make payment of such obligations and indebtedness upon demand.
- 3. Presumption of Receipt of Communication.** Communications may be sent to me at my address or at such other address as I may hereafter give you in writing, and all communications so sent, whether by mail, telegraph, messenger or otherwise, shall be deemed given to me personally, whether actually received or not.
- 4. Extraordinary Events.** You shall not be liable for loss caused directly or indirectly by war, natural disasters, government restrictions, exchange or market rulings or other conditions beyond your control, including but not limited to extreme market volatility or trading volumes.
- 5. Credit Information.** I understand that all information supplied by me will be subject to verification, and that the information on this application is correct. You may exchange credit information about me (us) with others. You may request a credit report on me (us) and, if I (we) ask, you will provide the name and address of the consumer-reporting agency that furnished it.
- 6. Joint Accounts.** If this is a joint account, "I" or "me" refers to all account holders jointly and severally agrees that any account holder has authority on behalf of the joint account to:
 - buy, sell and otherwise deal in stocks, bonds, and other eligible securities or other investments;
 - receive demands, notices, confirmations, reports, statements of account and communications of every kind on behalf of the joint account;
 - receive money, securities and property of every kind and dispose of the same on behalf of the joint account;
 - make agreements relating to any of the foregoing matters and to terminate, modify or waive any of the provisions of the agreement on behalf of the joint account; and
 - deal with VALIC Financial Advisors, Inc. as fully and completely as if he (she) alone were interested in this account and without notice to other account participants.All obligations and liabilities arising under this account are joint and several and may be enforced by VALIC Financial Advisors, Inc. against any or all account holders. VALIC Financial Advisors, Inc. is authorized to follow the instructions of any joint account holder, without notice to any other account holder, in every respect and to deliver any or all monies, securities or other property to any joint account holder upon the instructions of any other person upon such instructions, even if such delivery or payment is to that joint account holder personally and not to the other(s). VALIC Financial Advisors, Inc. will be under no obligation to inquire into the purpose or propriety of such delivery or payment and is not bound into the disposition or application of such delivery or payment. This authority remains in force until written notice to the contrary is addressed to VALIC Financial Advisors, Inc. and delivered to its office. VALIC Financial Advisors, Inc. at its sole discretion and for its sole protection, may terminate the account upon receipt of such notice and may require the written consent of all account holders prior to acting upon the instructions of any account holder.

This agreement and its enforcement shall be governed by the laws of Texas; shall cover individually and collectively all accounts which the undersigned may open or reopen with you; and shall inure to the benefit of your successors, whether by merger, consolidations or otherwise, and assigns. You may transfer the account of the undersigned to your successors and assigns. This Agreement shall be binding upon heirs, executors, administrators, successors and assigns of the undersigned.

IMPORTANT INFORMATION ABOUT PROCEDURES FOR OPENING A NEW ACCOUNT

To help the government fight the funding of terrorism and money laundering activities, Federal law requires all financial institutions to obtain, verify, and record information that identifies each person who opens an account.

What this means for you: When you open an account, we will ask for your name, address, date of birth and other information that will allow us to identify you. We may also ask to see your driver's license or other identifying documents.

INVESTMENT OBJECTIVES

Safety of Principal. For clients with a low tolerance for investment risk and/or a short time horizon. The investor generally seeks to hold securities with little or no price fluctuation.

Long-Term Growth. For clients with moderate to high tolerance for investment risk and a long time horizon. The investor seeks capital appreciation and has little need for current income.

Income. For clients seeking income and protection from inflation. The investor accepts less fluctuation in investment results by emphasizing more income and capital preservation and less long-term growth.

INTERNAL REVENUE SERVICE (IRS) AND DEPARTMENT OF LABOR (DOL) GUIDANCE ON MARRIAGE

For federal tax law and ERISA purposes, under current IRS and DOL guidance (1) a same-sex marriage that was valid in the state or country it was entered into will be recognized by the IRS or DOL, regardless of the married couple's place of domicile; and (2) although a state may recognize domestic partnerships or civil unions, the terms "spouse," "husband and wife," "husband," and "wife" do not include individuals who have entered into a registered domestic partnership, civil union, or other similar formal relationship recognized under state law that is not denominated as a marriage under the laws of that state.

PRE-DISPUTE ARBITRATION

This agreement contains a pre-dispute arbitration clause. Under this clause, I acknowledge and agree to the following:

- All parties to this agreement are giving up the right to sue each other in court, including the right to a trial by jury, except as provided by the rules of the arbitration forum in which a claim is filed.
- Arbitration awards are generally final and binding; a party's ability to have a court reverse or modify an arbitration award is very limited.
- The ability of the parties to obtain documents, witness statements and other discovery is generally more limited in arbitration than in court proceedings.
- The arbitrators do not have to explain the reason(s) for their award unless, in an eligible case, a joint request for an explained decision has been submitted by all parties to the panel at least 20 days prior to the first scheduled hearing date.
- The panel of arbitrators may include a minority of arbitrators who were or are affiliated with the securities industry.
- The rules of some arbitration forums may impose time limits for bringing a claim in arbitration. In some cases, a claim that is ineligible for arbitration may be brought in court.
- The rules of the arbitration forum in which the claim is filed, and any amendments thereto, shall be incorporated into this agreement. The arbitration will be conducted at a location mutually agreed by the parties or at a location chosen pursuant to applicable arbitration rules.

By signing this agreement, I acknowledge and agree that all controversies that may arise out of any subject matter, issue or circumstance whatsoever (including, but not limited to controversies concerning any account, order or transaction, or the continuation, performance, interpretation or breach of this or any other agreement between the parties, whether entered into or arising before, on or after the date this account is opened) shall be determined by arbitration through the Financial Industry Regulatory Authority (FINRA) or any United States securities self-regulatory organization or United States securities exchange of which the person, entity, or entities against whom the claim is made is a member, as you may designate. If I commence arbitration through a United States self-regulatory organization or United States securities exchange and the rules of that organization or exchange fail to be applied for any reason, then I shall commence arbitration with any other United States securities self-regulatory organization or United States securities exchange of which the person, entity, or entities against whom the claim is made is a member. I acknowledge that If VFA does not receive notice in writing of my designation within five (5) days after such failure or after I receive from VFA a written demand for arbitration, then I authorize VFA to make such designation on my behalf. The commencement of arbitration through a particular self-regulatory organization or securities exchange is not integral to the underlying agreement to arbitrate. I understand that judgment upon any arbitration award may be entered in any court of competent jurisdiction.

No person shall bring a putative or certified class action to arbitration, nor seek to enforce any pre-dispute arbitration agreement against any person who has initiated in court a putative class action; or who is a member of a putative class action who has not opted out of the class with respect to any claims encompassed by the putative class action until: (i) the class certification is denied; or (ii) the class is decertified; or (iii) the customer is excluded from the class by the court. Such forbearance to enforce an agreement to arbitrate shall not constitute a waiver of any rights under this agreement except to the extent stated herein.